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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/668,721
	Filing Date	September 22, 2003
	First Named Inventor	Haahr, Paul
	Art Unit	2171
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	025.0370.US.UTL

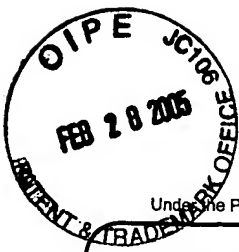
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Firm Name	Law Offices of Patrick J.S. Inouye		
Signature			
Printed name	Patrick J.S. Inouye		
Date	February 23, 2005	Reg. No.	40297

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Typed or printed name	Larissa V. Pigott	Date	February 23, 2005

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/668,721
Filing Date	September 22, 2003
First Named Inventor	Haahr, Paul
Art Unit	2171
Examiner Name	Unassigned
Attorney Docket Number	025.0370.US.UTL

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Pursuant to 37 CFR 10.40(b)(4), practitioner has been discharged by the client. Practitioner has taken reasonable steps to avoid foreseeable prejudice to the rights of the client, including giving due notice to the client, allowing time for employment of another practitioner, delivering to the client all papers and property to which the client is entitled, and complying with applicable laws and rules.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☐ Change the correspondence address and direct all future correspondence to:

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**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Kulpreet Rana				
Address	Google Inc. 1600 Amphitheatre Parkway, Bldg. 41				
City	Mountain View	State	CA	Zip	94043
Country					
Telephone	650-623-5123	Fax			
Signature					
Name	Patrick J.S. Inouye	Registration No.	40,297		
Date	February 23, 2005	Telephone No.	206-381-3900		

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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